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APPLICANTS

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** CONTINUING DATA *****
none eh

** FOREIGN APPLICATIONS *****
none eh

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials	STATE OR COUNTRY CA	SHEETS DRAWING 11	TOTAL CLAIMS 59	INDEPENDENT CLAIMS 9
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ADDRESS
 38456
 DENIRO/RAMBUS
 685 MARKET STREET, SUITE 540
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TITLE
 Clock data recovery with selectable phase control

FILING FEE RECEIVED 1892	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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